

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 1: Cover Sheet

Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity.

For detailed instructions on how to complete this form, see the Lobbyist Reporting Form: Individual Reporting Guide

This form must be submitted in its original digital format. Please do not print or scan this form.

LOBBYIST NAME	Title Mrs. Last Name* Swor My employe	First Name* Amanda er is a 501c(3) non-profit organization	Suffix	Middle W
EMPLOYING ENTITY	My employe behalf Entity/Organiza Drenner Group	r is registered as a business entity, pa	ays an entity registrat	ion fee, and is reporting on my
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Busi 200 Lee Barton City* Austin	iness Street Address* Drive	Apartment or 100 State* TX	Zip Code* 78704
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailin 200 Lee Barton City* Austin		Apartment or 100 State* TX	Zip Code* 78704



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	☐ I am registering as a new lobbyist				
	I am renewing my annual lobbyist registration				
	☐ I am updating my current registration information outside of a Quarterly Activity Reporting Period				
REPORT TYPE *	I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline:				
Check all that apply	☐ January ☐ April ☐ July ☐ October				
	I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.				



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Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munici	pal Question, clic	k the "Add Add	ditional Municipal Question" b	utton b	elow.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning, neighbo	dezoning, neighborhood plan amendment and sale of property						
PROPERTY ADDRESS	This municip description i		rtains to real property. *If che		ither a prop			
OR	500 Montopolis							
LEGAL DESCRIPTION	City			State		Zip Code		
	Austin			TX		78741		
	Property Legal De	escription						
Subject Matter(s)*: Check all sub	bject matters that	apply to the r	municipal question above					
Accessibility or Persons with	Disabilities		ental Matters, Air or Water r Watershed Protection		Permits (Bui	lding, Site Plans)		
Affordability		Finance, E	Budget, or Investments		Permits (Oth	ner)		
Animals		Health, H	ealthcare, Mental Health, or ervices			y, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic P	reservation		Public Utiliti	es, Energy, Water, Solid Wa	aste,	
Arts, Music, Film, Cultural or Creative Industries		Hospitalit Center	y, Tourism, Events, or Convention	n 🗌	Quality of Li	fe Affairs		
Aviation		Human Ri	ights or Immigration	\boxtimes	Real Estate			
City Infrastructure or Public V	Works	Labor or \	Norkforce		Rules, Propo	osed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or	∑ Land Dev	elopment or Land Use		Taxation or I	Fees		
Code Compliance		Municipa Municipa	l Court		Technology	or Communications		
Construction		Municipa Municipa	l Legislation		Transportati	on or Mobility		
Contracts or Procurement		Neighbor	hoods	\boxtimes	Zoning or Pla	atting		
Diversity, Equity, or Inclusion	ı	Parks, Red	creation, Libraries, or Museums					
Economic Development		Other:						



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To report more than one Munici	ipal Question, clic	k the "Add Additiona	l Municipal Question" b	utton below.				
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Development	ite Development Permit						
PROPERTY ADDRESS	This municip description i			cked, either a p	roperty address or legal			
OR DESCRIPTION	1115 Town Creek	Drive						
LEGAL DESCRIPTION	City			State	Zip Code			
	Austin			TX	78741			
	Property Legal De	escription						
Subject Matter(s)*: Check all sul	bject matters that	apply to the municip	oal question above					
Accessibility or Persons with	Disabilities	Environmental M Quality, or Water	latters, Air or Water rshed Protection	Permits (Building, Site Plans)			
Affordability		Finance, Budget,	or Investments	Permits (Other)			
Animals		Health, Healthca Human Services	re, Mental Health, or		fety, Policy, Fire, EMS, or cy Planning and Response			
Annexation		Historic Preserva	tion	Public Ut	ilities, Energy, Water, Solid Waste ling			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tour	ism, Events, or Convention	_	f Life Affairs			
Aviation		☐ Human Rights or	Immigration	Real Esta	te			
City Infrastructure or Public \	Works	Labor or Workfor	rce	Rules, Pr	oposed Rules, or Rule Making			
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Developme	nt or Land Use	Taxation	or Fees			
Code Compliance		Municipal Court		Technolo	ogy or Communications			
Construction		Municipal Legisla	ntion	Transpor	tation or Mobility			
Contracts or Procurement		Neighborhoods		Zoning o	r Platting			
Diversity, Equity, or Inclusion	1	Parks, Recreation	n, Libraries, or Museums					
Economic Development		Other:						



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To report more than one Muni	cipal Question, cli	ck the "Add Additional Municipal Question" bu	utton below.					
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Determination or	Determination on subdivision application						
PROPERTY ADDRESS	I—	 ∑ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address Suite or Apartment Number 						
OR			·					
LEGAL DESCRIPTION	City		State	Zip Code				
	City		TX	Zip Code				
	Property Legal D							
	Lots 8-11 Lake S	nore Colony						
Subject Matter(s)*: Check all s	ubject matters tha	t apply to the municipal question above						
Accessibility or Persons wit	h Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)				
Affordability		Finance, Budget, or Investments	Permits (Ot	her)				
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response				
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste				
Arts, Music, Film, Cultural of Creative Industries	or	Hospitality, Tourism, Events, or Convention Center	Quality of L	ife Affairs				
Aviation		Human Rights or Immigration	Real Estate					
City Infrastructure or Public	Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making				
Civil Service, Municipal Emp Retirement Systems			Taxation or	Fees				
Code Compliance		Municipal Court	Technology	or Communications				
Construction		Municipal Legislation	Transportat	ion or Mobility				
Contracts or Procurement		☐ Neighborhoods	Zoning or P	latting				
Diversity, Equity, or Inclusion	on	Parks, Recreation, Libraries, or Museums						
Economic Development		Other:						



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To report more than one Munic	ipal Question, clic	k the "Add Additional Municipal Question" bu	tton below.					
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Zoning - North Bu	Zoning - North Burnet Gateway Amendment						
PROPERTY ADDRESS	This municipudescription	ked, either a propulation	perty address or legal					
OR	11501 Burnet Ro	ad						
LEGAL DESCRIPTION	City	Si	tate	Zip Code				
	Austin	T	Х	78758				
	Property Legal D	escription						
Subject Matter(s)*: Check all su	bject matters tha	t apply to the municipal question above						
Accessibility or Persons with	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bui	lding, Site Plans)				
Affordability		Finance, Budget, or Investments	Permits (Oth	ner)				
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response				
Annexation		Historic Preservation	Public Utiliti or Recycling	es, Energy, Water, Solid Waste				
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convention Center	Quality of Li					
Aviation		Human Rights or Immigration	Real Estate					
City Infrastructure or Public	Works	Labor or Workforce	Rules, Propo	osed Rules, or Rule Making				
Civil Service, Municipal Emp Retirement Systems		Land Development or Land Use	Taxation or	Fees				
Code Compliance		Municipal Court	Technology	or Communications				
Construction		Municipal Legislation	Transportati	ion or Mobility				
Contracts or Procurement		☐ Neighborhoods	Zoning or Pl	atting				
Diversity, Equity, or Inclusion	n	Parks, Recreation, Libraries, or Museums						
Economic Development		Other:						



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To report more than one Munic	cipal Question, cli	ck the "Add Additional Municipal Question" b	utton below.					
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	PUD Amendmen	PUD Amendment						
PROPERTY ADDRESS	I —	 ∑ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address Suite or Apartment Number 						
OR								
LEGAL DESCRIPTION	City		State	Zip Code				
	City		State	Zip code				
	Property Legal D							
	Lots 4A, 5A, 6A a	and 1C of the Four Points Center PUD						
Subject Matter(s)*: Check all su	ubject matters tha	t apply to the municipal question above						
Accessibility or Persons with	n Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)				
Affordability		Finance, Budget, or Investments	Permits (Ot	her)				
Animals		Health, Healthcare, Mental Health, or Human Services		ty, Policy, Fire, EMS, or Planning and Response				
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste				
Arts, Music, Film, Cultural o	r	Hospitality, Tourism, Events, or Convention Center	Quality of L	ife Affairs				
Aviation		Human Rights or Immigration	Real Estate					
City Infrastructure or Public	Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making				
Civil Service, Municipal Emp Retirement Systems		Land Development or Land Use	Taxation or	Fees				
Code Compliance		Municipal Court	Technology	or Communications				
Construction		Municipal Legislation	Transporta	tion or Mobility				
Contracts or Procurement		☐ Neighborhoods	Zoning or P	latting				
Diversity, Equity, or Inclusion	n	Parks, Recreation, Libraries, or Museums						
Economic Development		Other:						



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To report more than one Munici	pal Question, clicl	the "Add Additional I	Municipal Question" butt	on below.				
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning	Rezoning						
	This municip		real property. *If checke	ed, either a pro	perty address or legal			
PROPERTY ADDRESS	Address		Suit	te or Apartment	Number			
OR	10201 Jollyville Ro	pad						
LEGAL DESCRIPTION	City		Star	te	Zip Code			
	Austin		TX		78759			
	Property Legal De	scription						
Subject Matter(s)*: Check all sub	ject matters that	apply to the municipa	al question above					
Accessibility or Persons with	Disabilities	Environmental Ma Quality, or Waters		Permits (B	uilding, Site Plans)			
Affordability		Finance, Budget, o	r Investments	Permits (O	ther)			
Animals		Health, Healthcare	, Mental Health, or		ety, Policy, Fire, EMS, or Planning and Response			
Annexation		Historic Preservati	on	Public Utili or Recyclin	ties, Energy, Water, Solid Waste,			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourisi Center	m, Events, or Convention	Quality of	Life Affairs			
Aviation		Human Rights or Ir	mmigration	Real Estate				
City Infrastructure or Public V	Vorks	Labor or Workforc	e	Rules, Prop	posed Rules, or Rule Making			
Civil Service, Municipal Emplo	oyment, or	Land Development	t or Land Use	Taxation o	r Fees			
Code Compliance		Municipal Court		Technology	y or Communications			
Construction		Municipal Legislati	on	Transporta	ition or Mobility			
Contracts or Procurement		Neighborhoods		Zoning or F	Platting			
Diversity, Equity, or Inclusion		Parks, Recreation,	Libraries, or Museums					
Economic Development		Other:						



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning and PDA	Rezoning and PDA Amendment						
	This municip	al question pertains to real pro	operty. *If checked, either	a property address or legal				
PROPERTY ADDRESS	Address		Suite or Apart	tment Number				
OR	7700 Parmer Lane							
LEGAL DESCRIPTION	City		State	Zip Code				
	Austin		TX	78729				
	Property Legal De	scription						
Subject Matter(s)*: Check all sul	ject matters that	apply to the municipal questi	on above					
Accessibility or Persons with	Disabilities	Environmental Matters, Air Quality, or Watershed Prote		nits (Building, Site Plans)				
Affordability		Finance, Budget, or Investm	nents Perm	nits (Other)				
Animals		Health, Healthcare, Mental Human Services		ic Safety, Policy, Fire, EMS, or rgency Planning and Response				
Annexation		Historic Preservation		ic Utilities, Energy, Water, Solid Waste, ecycling				
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events Center	s, or Convention Qual	ity of Life Affairs				
Aviation		Human Rights or Immigration	on Real	Estate				
City Infrastructure or Public \	Works	Labor or Workforce	Rules	s, Proposed Rules, or Rule Making				
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or Land	Use Taxa	tion or Fees				
Code Compliance		Municipal Court	☐ Tech	nology or Communications				
Construction		Municipal Legislation	Trans	sportation or Mobility				
Contracts or Procurement		Neighborhoods	∑ Zonir	ng or Platting				
Diversity, Equity, or Inclusion	ı	Parks, Recreation, Libraries,	, or Museums					
Economic Development		Other:						



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning				
PROPERTY ADDRESS	This municip description i	al question pertains to real s required.		d, either a prop	
OR	11012 Old San Ar	ntonio Road			
LEGAL DESCRIPTION	City		State	9	Zip Code
	Austin		TX		78748
	Property Legal De	escription			
Subject Matter(s)*: Check all sub	ject matters that	apply to the municipal que	estion above		
Accessibility or Persons with	Disabilities	Environmental Matters, Quality, or Watershed P		Permits (Buil	lding, Site Plans)
Affordability		Finance, Budget, or Inve	estments	Permits (Oth	er)
Animals		Health, Healthcare, Men	ntal Health, or		r, Policy, Fire, EMS, or Planning and Response
Annexation		Historic Preservation		Public Utilitie	es, Energy, Water, Solid Waste
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Ev Center	ents, or Convention	Quality of Lif	e Affairs
Aviation		Human Rights or Immig	ration [Real Estate	
City Infrastructure or Public V	Vorks	Labor or Workforce	I	Rules, Propo	sed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or La	and Use	Taxation or F	ees
Code Compliance		Municipal Court		Technology of	or Communications
Construction		Municipal Legislation	I	Transportati	on or Mobility
Contracts or Procurement		Neighborhoods	I	Zoning or Pla	atting
Diversity, Equity, or Inclusion		Parks, Recreation, Libra	ries, or Museums		
Economic Development		Other:			



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Development	ite Development Permit and Density Bonus					
PROPERTY ADDRESS	This municip description i		ertains to real property. *If che		ither a prop		
OR	600 Guadalupe						
LEGAL DESCRIPTION	City			State		Zip Code	
	Austin			TX		78701	
	Property Legal De	escription					
Subject Matter(s)*: Check all sub	ject matters that	apply to the r	municipal question above				
Accessibility or Persons with	Disabilities		ental Matters, Air or Water or Watershed Protection	\boxtimes	Permits (Bui	lding, Site Plans)	
Affordability		Finance, I	Budget, or Investments		Permits (Oth	ner)	
Animals		Health, H	ealthcare, Mental Health, or ervices			y, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic P	reservation		Public Utiliti	es, Energy, Water, Solid Wast	
Arts, Music, Film, Cultural or Creative Industries		Hospitalit Center	cy, Tourism, Events, or Convention	n 🗌	Quality of Li	fe Affairs	
Aviation		Human R	ights or Immigration		Real Estate		
City Infrastructure or Public V	Vorks	Labor or \	Workforce		Rules, Propo	osed Rules, or Rule Making	
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Dev	elopment or Land Use		Taxation or I	Fees	
Code Compliance		Municipa	l Court		Technology	or Communications	
Construction		Municipa Municipa	l Legislation		Transportati	on or Mobility	
Contracts or Procurement		☐ Neighbor	hoods		Zoning or Pla	atting	
Diversity, Equity, or Inclusion		Parks, Re	creation, Libraries, or Museums				
Economic Development		Other:					



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To report more than one Mun	icipal Question, cli	ick the "Add Additional Municipal Question" b	outton below.				
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Plan Topogr	ite Plan Topography					
PROPERTY ADDRESS		ipal question pertains to real property. *If chen is required.	ecked, either a pro				
OR	1701 Heatherw	ilde Blvd	•				
LEGAL DESCRIPTION	City		State	Zip Code			
	Austin		TX	78660			
	Property Legal I	Description					
Subject Matter(s)*: Check all s	subject matters the	at apply to the municipal question above					
Accessibility or Persons wi	th Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	uilding, Site Plans)			
Affordability		Finance, Budget, or Investments	Permits (Ot	ther)			
Animals		Health, Healthcare, Mental Health, or Human Services		ty, Policy, Fire, EMS, or Planning and Response			
Annexation		Historic Preservation	Public Utilit or Recycling	ties, Energy, Water, Solid Waste			
Arts, Music, Film, Cultural Creative Industries	or	Hospitality, Tourism, Events, or Convention Center		_			
Aviation		Human Rights or Immigration	Real Estate				
City Infrastructure or Publi	c Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making			
Civil Service, Municipal Em Retirement Systems	ployment, or	Land Development or Land Use	Taxation or	Fees			
Code Compliance		Municipal Court	Technology	or Communications			
Construction		Municipal Legislation	☐ Transporta	tion or Mobility			
Contracts or Procurement		Neighborhoods	Zoning or P	latting			
Diversity, Equity, or Inclusi	on	Parks, Recreation, Libraries, or Museums					
Economic Development		Other:					



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To report more than one N	/Junicipal Question, cl	ick the "Add Additional Municipal Question" bu	utton below.		
SPECIFIC DESCRIPTION OF MUNICIPAL QUESTION	Potential Rezon	Potential Rezoning			
PROPERTY ADDRESS	I —	ipal question pertains to real property. *If chenis required.	cked, either a prop	_	
OR	2904, 2882, 292		Barton Skyway		
LEGAL DESCRIPTION	City		State	Zip Code	
	Austin		ТХ	78746	
	Property Legal	Description			
Subject Matter(s)*: Check	all subject matters th	at apply to the municipal question above			
Accessibility or Person	s with Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)	
Affordability		Finance, Budget, or Investments	Permits (Ot	her)	
Animals		Health, Healthcare, Mental Health, or Human Services		ry, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste	
Arts, Music, Film, Culti Creative Industries	ural or	Hospitality, Tourism, Events, or Convention Center	Quality of L		
Aviation		Human Rights or Immigration	Real Estate		
City Infrastructure or I	Public Works	Labor or Workforce	Rules, Propo	osed Rules, or Rule Making	
Civil Service, Municipa Retirement Systems	l Employment, or	☐ Land Development or Land Use	Taxation or	Fees	
Code Compliance		Municipal Court	Technology	or Communications	
Construction		Municipal Legislation	Transportat	ion or Mobility	
Contracts or Procurem	ent	☐ Neighborhoods	Zoning or P	latting	
Diversity, Equity, or In	clusion	Parks, Recreation, Libraries, or Museums			
Economic Developmen	nt	Other:			



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Applicability of Restrictive Covenant				
PROPERTY ADDRESS	This municipal question pertains to real property. *If checked, either a property address description is required. Address Address Suite or Apartment Number				
OR	6901 Old Bee Ca	ves Road			
LEGAL DESCRIPTION	City	St	tate	Zip Code	
	Austin	T	Х	78735	
	Property Legal D	escription			
Subject Matter(s)*: Check all su	bject matters tha	t apply to the municipal question above			
Accessibility or Persons with	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bui	ilding, Site Plans)	
Affordability		Finance, Budget, or Investments	Permits (Oth	ner)	
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic Preservation	Public Utiliti or Recycling	es, Energy, Water, Solid Waste	
Arts, Music, Film, Cultural or Creative Industries	r	Hospitality, Tourism, Events, or Convention Center	Quality of Li		
Aviation		Human Rights or Immigration	Real Estate		
City Infrastructure or Public	Works	Labor or Workforce	Rules, Propo	osed Rules, or Rule Making	
Civil Service, Municipal Emp Retirement Systems		Land Development or Land Use	Taxation or	Fees	
Code Compliance		Municipal Court	Technology	or Communications	
Construction		Municipal Legislation	Transportati	ion or Mobility	
Contracts or Procurement		☐ Neighborhoods	Zoning or Pl	atting	
Diversity, Equity, or Inclusio	n	Parks, Recreation, Libraries, or Museums			
Economic Development		Other:			



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Developmen	Site Development Permit				
PROPERTY ADDRESS	This municipal question pertains to real property. *If checked, either a property address description is required. PROPERTY ADDRESS Address Suite or Apartment Number					
OR	3000-3004 Mont	copolis Dr.				
LEGAL DESCRIPTION	City	St	tate	Zip Code		
	Austin	Т	Х	78741		
	Property Legal D	escription				
Subject Matter(s)*: Check all su	ubject matters tha	t apply to the municipal question above				
Accessibility or Persons with	n Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bui	ilding, Site Plans)		
Affordability		Finance, Budget, or Investments	Permits (Otl	ner)		
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic Preservation	Public Utiliti or Recycling	ies, Energy, Water, Solid Waste		
Arts, Music, Film, Cultural o Creative Industries	r	Hospitality, Tourism, Events, or Convention Center	Quality of Li			
Aviation		Human Rights or Immigration	Real Estate			
City Infrastructure or Public	Works	Labor or Workforce	Rules, Propo	osed Rules, or Rule Making		
Civil Service, Municipal Emp Retirement Systems		Land Development or Land Use	Taxation or	Fees		
Code Compliance		Municipal Court	Technology	or Communications		
Construction		Municipal Legislation	Transportat	ion or Mobility		
Contracts or Procurement		☐ Neighborhoods	Zoning or Pl	atting		
Diversity, Equity, or Inclusio	n	Parks, Recreation, Libraries, or Museums				
Economic Development		Other:				



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
	1			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	KEEP Real Estate			
	Client Business Address*	Client Apartment o	r Suite Number	
	905 Nueces Street			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	ТХ	78701	
NATURE OF	Nature of Client's Business*			
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* \$0	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Disclosure of client compensation is not provided beca Disciplinary Rule 1.05 and Chapter 81 of the Texas Gov		

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client reporting period	t compensation du	uring the applicable
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable* Grayco Parnters LLC		
	Client Business Address* 50 Waugh Drive	Client Apartment	or Suite Number
CLIENT ADDRESS AND NATURE OF BUSINESS	Client City* Houston Nature of Client's Business*	Client State* TX	Client Zip Code* 77007
503111233	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Disclosure of client compensation is not provided beca Disciplinary Rule 1.05 and Chapter 81 of the Texas Gove		'''

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clien reporting period	t compensation du	iring the applicable
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable* Investors Aliance		
	Client Business Address* 300 Bowie Street	Client Apartment	or Suite Number
CLIENT ADDRESS AND NATURE OF	Client City* Austin Nature of Client's Business*	Client State*	Client Zip Code* 78703
BUSINESS	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0	OR	(\$) Exact Amount
Per City Code Section 4-8-6(A)(j), the exact of for compensation totaling \$500,000 or more		\$(A)(j), the exact compensation amount is required \$500,000 or more. e Client Compensation information, provide your reason(s) (250 char. max):	
	Disclosure of client compensation is not provided beca Disciplinary Rule 1.05 and Chapter 81 of the Texas Gov		

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client reporting period	t compensation du	uring the applicable
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable* Brandywine Realty Trust		
	Client Business Address*	Client Apartment	or Suite Number
CLIENT ADDRESS	111 Congress Avenue Client City*	30th Floor Client State*	Client Zip Code*
ADDRESS	Austin	ТХ	78701
NATURE OF BUSINESS	Nature of Client's Business* Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* \$0	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Disclosure of client compensation is not provided beca Disciplinary Rule 1.05 and Chapter 81 of the Texas Gov		

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client reporting period	t compensation du	ring the applicable
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Great Hills Retail Inc.		
	Client Business Address*	Client Apartment	or Suite Number
	191 North Wacker Drive	2500	
CLIENT			
ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Chicago	IL	60606
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category* (\$) Exact Amount	
CLIENT	\$0 OR	
COMPENSATION		
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you fail to provide the above Client Compensation information, provide your reason(s) (2	50 char. max):
	Disclosure of client compensation is not provided because such disclosure would violate ap Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.	plicable state law in Texas

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clien reporting period	t compensation du	iring the applicable
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable* Accesso Partners		
	Client Business Address* 1021 Main Street	Client Apartment	or Suite Number
CLIENT ADDRESS AND NATURE OF BUSINESS	Client City* Houston Nature of Client's Business* Real Estate Development	Client State*	Client Zip Code* 77002

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Disclosure of client compensation is not provided beca Disciplinary Rule 1.05 and Chapter 81 of the Texas Gov		

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clients reporting period	t compensation du	uring the applicable
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable* LO/LDP 600 Guadalupe LLC		
	Client Business Address* 12117 Bee Cave Road	Client Apartment	or Suite Number
CLIENT ADDRESS AND NATURE OF BUSINESS	Client City* Austin Nature of Client's Business* Real Estate Development	Client State*	Client Zip Code* 78738

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* \$0	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
Disclosure of client compensation is not provided because such disclosure would violate app Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.			

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clien reporting period	nt compensation du	iring the applicable
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable* Presidium Group		
	Client Business Address*	Client Apartment	or Suite Number
	1601 Rio Grande	300	
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code* 78701
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category* (\$) Exact Amount	
CLIENT	\$0 OR	
COMPENSATION		
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you fail to provide the above Client Compensation information, provide your reason(s) (2	50 char. max):
	Disclosure of client compensation is not provided because such disclosure would violate ap Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.	plicable state law in Texas

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clien reporting period	t compensation du	ring the applicable
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	QuikTrip Corporation		
	Client Business Address*	Client Apartment o	r Suite Number
	227 North Loop 1604 E	150	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	San Antonio	TX	78232
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* \$0	OR	(\$) Exact Amount
COMI ENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	isclosure of client compensation is not provided because such disclosure would violate applicable state isciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.		• • • • • • • • • • • • • • • • • • • •

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Arel Capital		
	Client Business Address*	Client Apartment o	or Suite Number
_	540 Madison Avenue		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	New York	NY	10022
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* \$0	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
Disclosure of client compensation is not provided because such disclosure would violate app Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.			

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no clien reporting period	t compensation dur	ring the applicable
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Manifold Real Estate		
	Client Business Address*	Client Apartment o	r Suite Number
_	P.O. Box 200463		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	ТХ	78720
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*		(\$) Exact Amount		
	\$0	OR			
COMPENSATION					
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.				
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):				
	Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Te Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.				

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

NO EMPLOYEES TO REPORT		the applicable reporting period
PERSON EMPLOYED OR RETAINED	Title First Name* Last Name * Employer*	Middle Suffix Occupation*
BUSINESS ADDRESS	Business Address* City*	Apartment or Suite Number State* Zip Code*
MAYOR/COUNCIL RELATIVE OR HOUSEHOLD MEMBER	Is the person identified above related (within the thir Council Member, or a member of their household, as If yes, describe the nature of their employment *requir First Name of Mayor/Council Member Las	defined in City Code Section 4-8-6(A)(5)?

* Indicates a required field



If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.



Section 5: Statement of No Activity

STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED

Lobbyists who have **no reportable activity** for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the **No Activity Confirmation**, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

No Activity Confirmation I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 6: Expenditure Totals

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

EXPENDITURE TOTALS	(\$) Reimbursement to Others
	(\$) Food and Beverages
	(\$) Transportation and Lodging
	(\$) Gifts (other than Awards and Mementos)
	(\$) Entertainment
	(\$) Awards and Mementos
(Blank values	(\$) Honorariums
will be interpreted as \$0)	(\$) Attendance of Council Members at Charitable Events or Fundraisers
	(\$) Media Communications (broadcast, print, advertising, etc.)
	(\$) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 7: Expenditure

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total \$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

PAYEE NAME	Organization Name or Payee Last Name,	as applicable*				
BUSINESS INTEREST	This payee is a business or business interest of a City Official					
	If yes, First Name of City Official	Las	Last Name of City Official			
Payee is an individual						
	Department of City Official	Job	Job Title of City Official			
	Payee Address/ PO Box*		Payee Apartm	ent or Suite Number		
PAYEE						
ADDRESS	Payee City*		Payee State* Payee Zip Code*			
EXPENDITURE	(\$) Expenditure Amount* Expenditure Date* Category*					
DETAILS	Purpose of the Expenditure*					
Identify each City Official w	vho benefitted from or who may	/ have been influe	nced by the	expenditure, if applicable		
City Official First Name	City Official First Name City Official Last Name		nt	Job Title		
Add Another Expenditure Page			Delete t	his page 32 Revised: 9/25/2017		



Section 8: Declaration and Electronic Submission

DECLARATION

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

Amanda Swor	10/13/2017
Typed Name	Report Date*

Electronic Submission and Signature

I have completed a **Lobbyist Contact Information Form**, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.



The Following Report is the Corrected Report for Swor, Amanda W.'s October Quarterly Activity Report Submitted on 1/23/2018



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 1: Cover Sheet

Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity.

For detailed instructions on how to complete this form, see the Lobbyist Reporting Form: Individual Reporting Guide

This form must be submitted in its original digital format. Please do not print or scan this form.

LOBBYIST NAME	Title Mrs. Last Name* Swor My employe	First Name* Amanda er is a 501c(3) non-profit organization	Suffix	Middle W	
EMPLOYING ENTITY	My employer is registered as a business entity, pays an entity registration fee, and is reporting on my behalf Entity/Organization Name* Drenner Group				
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Busi 200 Lee Barton City* Austin	iness Street Address* Drive	Apartment or 100 State* TX	Zip Code* 78704	
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailing Address* 200 Lee Barton Drive City* Austin		Apartment or 100 State* TX	State* Zip Code*	



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

	☐ I am registering as a new lobbyist			
	☐ I am renewing my annual lobbyist registration			
	☐ I am updating my current registration information outside of a Quarterly Activity Reporting Period			
REPORT TYPE *	I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline:			
Check all that apply	☐ January ☐ April ☐ July ☐ October			
	I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.			



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munici	pal Question, clic	k the "Add Additio	nal Municipal Question" b	outton below.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning, neighborhood plan amendment and sale of property					
PROPERTY ADDRESS	This municipal question pertains to real property. *If description is required. Address			checked, either a property address or legal Suite or Apartment Number		
OR LEGAL DESCRIPTION	500 Montopolis					
LEGAL DESCRIPTION	City			State	Zip Code	
	Austin	T		тх	78741	
	Property Legal De	escription				
Subject Matter(s)*: Check all sub	ject matters that	apply to the mun	icipal question above			
Accessibility or Persons with	Disabilities		l Matters, Air or Water atershed Protection	Permits	(Building, Site Plans)	
Affordability		Finance, Budg	et, or Investments	Permits	(Other)	
Animals		Health, Health Human Servic	ncare, Mental Health, or es		Safety, Policy, Fire, EMS, or ency Planning and Response	
Annexation		Historic Prese	rvation	Public U or Recy	Jtilities, Energy, Water, Solid Waste cling	
Arts, Music, Film, Cultural or Creative Industries		Hospitality, To	ourism, Events, or Convention	Quality	of Life Affairs	
Aviation		Human Rights or Immigration				
City Infrastructure or Public V	Vorks	Labor or Work	rforce	Rules, P	Proposed Rules, or Rule Making	
Civil Service, Municipal Emplo Retirement Systems	oyment, or		ment or Land Use	Taxatio	n or Fees	
Code Compliance		Municipal Cou	ırt	Techno	logy or Communications	
Construction		Municipal Leg	islation	Transpo	ortation or Mobility	
Contracts or Procurement		Neighborhood	ds	Zoning	or Platting	
Diversity, Equity, or Inclusion		Parks, Recreat	cion, Libraries, or Museums			
Economic Development		Other:				



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munic	cipal Question, clic	ck the "Add Additional Municipal Question" bu	utton below.				
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Developmen	Site Development Permit					
PROPERTY ADDRESS	I —	 ☐ This municipal question pertains to real property. *If checked, either a property address description is required. Address Suite or Apartment Number 					
OR	1115 Town Cree						
LEGAL DESCRIPTION	City	S	State	Zip Code			
	Austin	Т	ГХ	78741			
	Property Legal D	escription					
Subject Matter(s)*: Check all su	ubject matters tha	t apply to the municipal question above					
Accessibility or Persons with	n Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)			
Affordability		Finance, Budget, or Investments	Permits (Ot	her)			
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response			
Annexation		Historic Preservation	Public Utilitior Public Utilition	ies, Energy, Water, Solid Waste			
Arts, Music, Film, Cultural of Creative Industries	r	Hospitality, Tourism, Events, or Convention Center	Quality of Li				
Aviation		Human Rights or Immigration	Real Estate				
City Infrastructure or Public	Works	Labor or Workforce	Rules, Propo	osed Rules, or Rule Making			
Civil Service, Municipal Emp Retirement Systems		Land Development or Land Use	Taxation or	Fees			
Code Compliance		Municipal Court	Technology	or Communications			
Construction		Municipal Legislation	Transportat	ion or Mobility			
Contracts or Procurement		☐ Neighborhoods	Zoning or Pl	atting			
Diversity, Equity, or Inclusio	n	Parks, Recreation, Libraries, or Museums					
Economic Development		Other:					



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munic	cipal Question, cli	ck the "Add Additional Municipal Question" b	utton below.					
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Determination or	Determination on subdivision application						
PROPERTY ADDRESS		This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address Suite or Apartment Number						
OR			·					
LEGAL DESCRIPTION	City		State	Zip Code				
	City		TX	zip code				
	Property Legal D							
	Lots 8-11 Lake S	nore Colony						
Subject Matter(s)*: Check all su	ubject matters tha	t apply to the municipal question above						
Accessibility or Persons with	n Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)				
Affordability		Finance, Budget, or Investments	Permits (Ot	her)				
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response				
Annexation		Historic Preservation	Public Utiliti or Recycling	ies, Energy, Water, Solid Waste S				
Arts, Music, Film, Cultural o Creative Industries	r	Hospitality, Tourism, Events, or Convention Center	Quality of Li	ife Affairs				
Aviation		Human Rights or Immigration	Real Estate					
City Infrastructure or Public	Works	Labor or Workforce	Rules, Propo	osed Rules, or Rule Making				
Civil Service, Municipal Emp Retirement Systems			Taxation or	Fees				
Code Compliance		Municipal Court	Technology	or Communications				
Construction		Municipal Legislation	Transportat	ion or Mobility				
Contracts or Procurement		☐ Neighborhoods	Zoning or Pl	atting				
Diversity, Equity, or Inclusion	n	Parks, Recreation, Libraries, or Museums						
Economic Development		Other:						



Add Additional Municipal Question

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munici	pal Question, clic	k the "Add Add	itional Municipal Question" b	outton be	low.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Zoning - North Bu	Zoning - North Burnet Gateway Amendment					
PROPERTY ADDRESS	This municip description i		tains to real property. *If ch		ther a prop		
OR LEGAL DESCRIPTION	11501 Burnet Roa	ad					
LEGAL DESCRIPTION	City			State		Zip Code	
	Austin			TX		78758	
	Property Legal De	escription					
Subject Matter(s)*: Check all sub	pject matters that	apply to the m	nunicipal question above				
Accessibility or Persons with	Disabilities		ental Matters, Air or Water Watershed Protection	F	Permits (Buil	lding, Site Plans)	
Affordability		Finance, B	udget, or Investments	F	Permits (Oth	ner)	
Animals		Health, He	althcare, Mental Health, or rvices			r, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic Pr	eservation		Public Utilitie or Recycling	es, Energy, Water, Solid Waste	
Arts, Music, Film, Cultural or Creative Industries		Hospitality Center	, Tourism, Events, or Convention	n 🗌 (Quality of Lif	fe Affairs	
Aviation		Human Rig	thts or Immigration	F	Real Estate		
City Infrastructure or Public V	Vorks	Labor or W	/orkforce	F	Rules, Propo	sed Rules, or Rule Making	
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Deve	lopment or Land Use		Taxation or F	Fees	
Code Compliance		Municipal	Court		Technology (or Communications	
Construction		Municipal	Legislation		Transportati	on or Mobility	
Contracts or Procurement		Neighborh	oods	\boxtimes Z	Zoning or Pla	atting	
Diversity, Equity, or Inclusion		Parks, Rec	reation, Libraries, or Museums				
Economic Development		Other:					

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Muni	cipal Question, cli	ck the "Add Additional Municipal Question"	button below.					
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	PUD Amendmen	PUD Amendment						
	_	This municipal question pertains to real property. *If checked, either a property address or led description is required.						
PROPERTY ADDRESS	Address		Suite or Apartm	nent Number				
OR								
LEGAL DESCRIPTION			-					
	City		State	Zip Code				
	Property Legal D	Description						
	Lots 4A, 5A, 6A	and 1C of the Four Points Center PUD						
Subject Matter(s)*: Check all s	ubject matters tha	at apply to the municipal question above						
Accessibility or Persons wit	h Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permit	s (Building, Site Plans)				
Affordability		Finance, Budget, or Investments	Permit	s (Other)				
Animals		Health, Healthcare, Mental Health, or Human Services		Safety, Policy, Fire, EMS, or ency Planning and Response				
Annexation		Historic Preservation	Public or Recy	Utilities, Energy, Water, Solid Waste cling				
Arts, Music, Film, Cultural of Creative Industries	or	Hospitality, Tourism, Events, or Conventio Center	n 🔲 Quality	of Life Affairs				
Aviation		Human Rights or Immigration	Real Es	tate				
City Infrastructure or Public	c Works	Labor or Workforce	Rules,	Proposed Rules, or Rule Making				
Civil Service, Municipal Emp Retirement Systems	ployment, or	Land Development or Land Use	Taxatio	on or Fees				
Code Compliance		Municipal Court	Techno	ology or Communications				
Construction		Municipal Legislation	☐ Transp	ortation or Mobility				
Contracts or Procurement		Neighborhoods		or Platting				
Diversity, Equity, or Inclusion	on	Parks, Recreation, Libraries, or Museums						
Economic Development		Other:						



Add Additional Municipal Question

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munici	pal Question, clic	the "Add Additional Mu	nicipal Question" button	below.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning	tezoning					
	This municip	al question pertains to re	al property. *If checked,	either a prop	erty address or legal		
PROPERTY ADDRESS	Address		Suite	or Apartment N	lumber		
OR	10201 Jollyville R	oad					
LEGAL DESCRIPTION	City		State		Zip Code		
	Austin		TX		78759		
	Property Legal De	escrintion					
	Troperty Legar De	ЗСПРСКИ					
Subject Matter(s)*: Check all sul	ject matters that	apply to the municipal q	uestion above				
Accessibility or Persons with	Disabilities	Environmental Matter Quality, or Watershed		Permits (Bui	lding, Site Plans)		
Affordability		Finance, Budget, or In	vestments	Permits (Oth	ner)		
Animals		Health, Healthcare, M Human Services	ental Health, or		r, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic Preservation		Public Utilition	es, Energy, Water, Solid Waste		
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, E	events, or Convention	Quality of Lif	fe Affairs		
Aviation		Human Rights or Imm	igration	Real Estate			
City Infrastructure or Public \	Works	Labor or Workforce		Rules, Propo	sed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or	Land Use	Taxation or I	Fees		
Code Compliance		Municipal Court		Technology	or Communications		
Construction		Municipal Legislation		Transportati	on or Mobility		
Contracts or Procurement		Neighborhoods		Zoning or Pla	atting		
Diversity, Equity, or Inclusion	ı	Parks, Recreation, Libi	raries, or Museums				
Economic Development		Other:					

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munici	pal Question, clic	k the "Add Additional Municip	al Question" button	below.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning and PDA	Rezoning and PDA Amendment					
PROPERTY ADDRESS	This municip	al question pertains to real pr s required.		either a prop			
OR	7700 Parmer Lane	2					
LEGAL DESCRIPTION	City		State		Zip Code		
	Austin		TX		78729		
	Property Legal De	escription					
Subject Matter(s)*: Check all sub	ject matters that	apply to the municipal quest	on above				
Accessibility or Persons with I	Disabilities	Environmental Matters, Air Quality, or Watershed Prot		Permits (Bui	ilding, Site Plans)		
Affordability		Finance, Budget, or Investr	nents	Permits (Oth	ner)		
Animals		Health, Healthcare, Menta Human Services	Health, or		y, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic Preservation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste		
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Event	s, or Convention	Quality of Li	fe Affairs		
Aviation		Human Rights or Immigration	on [Real Estate			
City Infrastructure or Public V	Vorks	Labor or Workforce		Rules, Propo	osed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or Land	Use	Taxation or	Fees		
Code Compliance		Municipal Court		Technology	or Communications		
Construction		Municipal Legislation		Transportati	ion or Mobility		
Contracts or Procurement		Neighborhoods		Zoning or Pla	atting		
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries	s, or Museums				
Economic Development		Other:					



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munici	pal Question, clic	k the "Add Additional Municip	al Question" button	below.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning	Rezoning					
PROPERTY ADDRESS	This municip description i	pal question pertains to real pr is required.		either a prop			
OR	11012 Old San Ar	ntonio Road					
LEGAL DESCRIPTION	City		State		Zip Code		
	Austin		TX		78748		
	Property Legal De	escription					
Subject Matter(s)*: Check all sub	oject matters that	t apply to the municipal questi	ion above				
Accessibility or Persons with	Disabilities	Environmental Matters, Air Quality, or Watershed Prot		Permits (Bui	lding, Site Plans)		
Affordability		Finance, Budget, or Investr	ments	Permits (Oth	ner)		
Animals		Health, Healthcare, Mental Human Services	Health, or		y, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic Preservation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste		
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Event Center	s, or Convention	Quality of Li	fe Affairs		
Aviation		Human Rights or Immigrati	on _	Real Estate			
City Infrastructure or Public V	Works	Labor or Workforce		Rules, Propo	osed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or Land	Use] Taxation or	Fees		
Code Compliance		Municipal Court		Technology	or Communications		
Construction		Municipal Legislation		Transportati	ion or Mobility		
Contracts or Procurement		Neighborhoods		Zoning or Pla	atting		
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries	s, or Museums				
Economic Development		Other:					



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munici	pal Question, clic	k the "Add Additional Mu	unicipal Question" butto	on below.				
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Development	ite Development Permit and Density Bonus						
PROPERTY ADDRESS	This municip description i	al question pertains to re s required.		ed, either a prop				
OR LEGAL DESCRIPTION	600 Guadalupe							
LEGAL DESCRIPTION	City		Stat	te	Zip Code			
	Austin		тх		78701			
	Property Legal De	escription						
Subject Matter(s)*: Check all sul	bject matters that	apply to the municipal q	question above					
Accessibility or Persons with	Disabilities	Environmental Matte Quality, or Watershee		Permits (Bui	lding, Site Plans)			
Affordability		Finance, Budget, or Ir	nvestments	Permits (Oth	ner)			
Animals		Health, Healthcare, M Human Services	Mental Health, or		y, Policy, Fire, EMS, or Planning and Response			
Annexation		Historic Preservation		Public Utiliti	es, Energy, Water, Solid Waste			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Center	Events, or Convention	Quality of Li				
Aviation		Human Rights or Imm	nigration	Real Estate				
City Infrastructure or Public V	Works	Labor or Workforce		Rules, Propo	osed Rules, or Rule Making			
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Development or	Land Use	Taxation or	Fees			
Code Compliance		Municipal Court		Technology	or Communications			
Construction		Municipal Legislation		Transportati	on or Mobility			
Contracts or Procurement		Neighborhoods		Zoning or Pla	atting			
Diversity, Equity, or Inclusion	1	Parks, Recreation, Lib	oraries, or Museums					
Economic Development		Other:						



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Mu	nicipal Question, cl	ick the "Add Additional Municipal Question" bເ	utton below.			
SPECIFIC DESCRIPTION OF TH MUNICIPAL QUESTION*	E Site Plan Topogi	Site Plan Topography				
PROPERTY ADDRESS	_	ipal question pertains to real property. *If checon is required.	cked, either a pro	,		
OR	1701 Heatherw					
LEGAL DESCRIPTION	City		State	Zip Code		
	Austin	1	гх	78660		
	Property Legal	Description				
Subject Matter(s)*: Check all	subject matters th	at apply to the municipal question above				
Accessibility or Persons w	rith Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	illding, Site Plans)		
Affordability		Finance, Budget, or Investments	Permits (Ot	her)		
Animals		Health, Healthcare, Mental Health, or Human Services		ty, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic Preservation	Public Utilit or Recycling	cies, Energy, Water, Solid Waste		
Arts, Music, Film, Cultural Creative Industries	lor	Hospitality, Tourism, Events, or Convention Center	Quality of L	_		
Aviation		Human Rights or Immigration	Real Estate			
City Infrastructure or Pub	lic Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making		
Civil Service, Municipal Er Retirement Systems	mployment, or	Land Development or Land Use	Taxation or	Fees		
Code Compliance		Municipal Court	Technology	or Communications		
Construction		Municipal Legislation	☐ Transportat	tion or Mobility		
Contracts or Procuremen	t	☐ Neighborhoods	Zoning or P	latting		
Diversity, Equity, or Inclus	sion	Parks, Recreation, Libraries, or Museums				
Economic Development		Other:				



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munic	cipal Question, clic	ck the "Add Additional Municipal Question" bu	tton below.					
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Potential Rezonir	Potential Rezoning						
PROPERTY ADDRESS	I —	 This municipal question pertains to real property. *If checked, either a property address or description is required. Address Suite or Apartment Number 						
OR	2904, 2882, 2928	3, 2936, 2942, 2953, 2960	arton Skyway					
LEGAL DESCRIPTION	City	Si	tate	Zip Code				
	Austin	T.	X	78746				
	Property Legal D	escription						
Subject Matter(s)*: Check all su	ıbject matters tha	t apply to the municipal question above						
Accessibility or Persons with	n Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bui	ilding, Site Plans)				
Affordability		Finance, Budget, or Investments	Permits (Otl	ner)				
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response				
Annexation		Historic Preservation	Public Utiliti or Recycling	es, Energy, Water, Solid Waste				
Arts, Music, Film, Cultural or Creative Industries	r	Hospitality, Tourism, Events, or Convention Center	Quality of Li	fe Affairs				
Aviation		Human Rights or Immigration	Real Estate					
City Infrastructure or Public	Works	Labor or Workforce	Rules, Propo	osed Rules, or Rule Making				
Civil Service, Municipal Emp Retirement Systems		Land Development or Land Use	Taxation or	Fees				
Code Compliance		Municipal Court	Technology	or Communications				
Construction		Municipal Legislation	Transportat	ion or Mobility				
Contracts or Procurement		☐ Neighborhoods	Zoning or PI	atting				
Diversity, Equity, or Inclusio	n	Parks, Recreation, Libraries, or Museums						
Economic Development		Other:						



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munici	pal Question, clic	k the "Add Add	tional Municipal Question" b	outton be	elow.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Applicability of Re	Applicability of Restrictive Covenant					
PROPERTY ADDRESS	This municip description i	-	tains to real property. *If che		ther a prop Apartment N		
OR	6901 Old Bee Cav	es Road					
LEGAL DESCRIPTION	City			State		Zip Code	
	Austin			TX		78735	
	Property Legal De	escription					
Subject Matter(s)*: Check all sub	ject matters that	apply to the m	unicipal question above				
Accessibility or Persons with	Disabilities		ntal Matters, Air or Water Watershed Protection		Permits (Bui	lding, Site Plans)	
Affordability		Finance, Bu	udget, or Investments		Permits (Oth	ner)	
Animals		Health, He	althcare, Mental Health, or vices			r, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic Pro	eservation		Public Utilition	es, Energy, Water, Solid Waste	
Arts, Music, Film, Cultural or Creative Industries		Hospitality Center	, Tourism, Events, or Conventior	n 🔲 (Quality of Lif	fe Affairs	
Aviation		Human Rig	hts or Immigration		Real Estate		
City Infrastructure or Public V	Vorks	Labor or W	orkforce		Rules, Propo	sed Rules, or Rule Making	
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Deve	opment or Land Use		Taxation or I	Fees	
Code Compliance		Municipal	Court		Technology	or Communications	
Construction		Municipal	Legislation		Transportati	on or Mobility	
Contracts or Procurement		Neighborh	oods	\boxtimes 7	Zoning or Pla	atting	
Diversity, Equity, or Inclusion		Parks, Recr	reation, Libraries, or Museums				
Economic Development		Other:					



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munici	pal Question, clic	k the "Add Additio	nal Municipal Question" b	outton below.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Development	ite Development Permit					
PROPERTY ADDRESS	This municip description i			ecked, either a	a property address or legal		
OR LEGAL DESCRIPTION	3000-3004 Monte	opolis Dr.					
LEGAL DESCRIPTION	City			State	Zip Code		
	Austin			тх	78741		
	Property Legal De	escription					
Subject Matter(s)*: Check all sub	pject matters that	apply to the mun	icipal question above				
Accessibility or Persons with	Disabilities		l Matters, Air or Water atershed Protection	Permit	ts (Building, Site Plans)		
Affordability		Finance, Budg	et, or Investments	Permit	ts (Other)		
Animals		Health, Health Human Servic	ncare, Mental Health, or es		Safety, Policy, Fire, EMS, or ency Planning and Response		
Annexation		Historic Prese	rvation	Public or Rec	Utilities, Energy, Water, Solid Waste ycling		
Arts, Music, Film, Cultural or Creative Industries		Hospitality, To	ourism, Events, or Conventior	n 🔲 Qualit	y of Life Affairs		
Aviation		Human Rights	or Immigration	Real E	state		
City Infrastructure or Public V	Vorks	Labor or Work	rforce	Rules,	Proposed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land Develop	ment or Land Use	Taxatio	on or Fees		
Code Compliance		Municipal Cou	ırt	Techno	ology or Communications		
Construction		Municipal Leg	islation	☐ Transp	portation or Mobility		
Contracts or Procurement		Neighborhood	ds	Zoning	g or Platting		
Diversity, Equity, or Inclusion		Parks, Recrea	cion, Libraries, or Museums				
Economic Development		Other:					



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
	1			
CLIENT NAME				
Client is an individual	Organization Name or Client Last Name, as applicable* KEEP Real Estate			
	Client Business Address* 905 Nueces Street	Client Apartment c	or Suite Number	
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code* 78701	
NATURE OF BUSINESS	Nature of Client's Business* Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount	
CLIENT	less than \$10,000	OR		
COMPENSATION				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.			
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):			

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
	T			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	Grayco Parnters LLC			
	Client Business Address*	Client Apartment o	or Suite Number	
_	50 Waugh Drive	500		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Houston	TX	77007	
NATURE OF	Nature of Client's Business*			
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount	
CLIENT	less than \$10,000	OR		
COMPENSATION				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.			
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):			

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
	T			
CLIENT				
NAME				
☐ Client is an individual	Organization Name or Client Last Name, as applicable* Investors Aliance			
	Client Business Address*	Client Apartment o	r Suite Number	
	300 Bowie Street	100A		
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code*	
NATURE OF BUSINESS	Nature of Client's Business*			
	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount	
CLIENT	less than \$10,000	OR		
COMPENSATION				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.			
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):			

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable *			
Cilent is an individual	Brandywine Realty Trust			
	Client Business Address* 111 Congress Avenue	Client Apartment of 30th Floor	or Suite Number	
CLIENT ADDRESS AND NATURE OF	Client City* Austin Nature of Client's Business*	Client State*	Client Zip Code* 78701	
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount	
CLIENT	less than \$10,000	OR		
COMPENSATION				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.			
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):			

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	Great Hills Retail Inc.			
	Client Business Address*	Client Apartment o	or Suite Number	
	191 North Wacker Drive	2500		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Chicago	IL	60606	
NATURE OF	Nature of Client's Business*			
BUSINESS	Real Estate Development			

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount	
CLIENT	less than \$10,000	OR		
COMPENSATION				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.			
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):			

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clients reporting period	nt compensation du	iring the applicable
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Accesso Partners		
	Client Business Address*	Client Apartment	or Suite Number
	1021 Main Street	Suite 1920	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Houston	TX	77002
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount	
CLIENT	less than \$10,000	OR		
COMPENSATION				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.			
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):			

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	I		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	LO/LDP 600 Guadalupe LLC		
	Client Business Address*	Client Apartment o	or Suite Number
_	12117 Bee Cave Road	202	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	ТХ	78738
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required		
	for compensation totaling \$500,000 If you fail to provide the above Client Co		, provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Presidium Group		
	Client Business Address*	Client Apartment o	r Suite Number
	1601 Rio Grande	300	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	тх	78701
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required		
	for compensation totaling \$500,000 If you fail to provide the above Client Co		, provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME Client is an individual	Organization Name or Client Last Name, as applicable *		
Ciletit is all illulvidual	QuikTrip Corporation		
	Client Business Address* 227 North Loop 1604 E	Client Apartment	or Suite Number
CLIENT ADDRESS AND	Client City* San Antonio	Client State*	Client Zip Code* 78232
NATURE OF BUSINESS	Nature of Client's Business* Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required		
	for compensation totaling \$500,000 If you fail to provide the above Client Co		, provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	I		
CLIENT NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable* Arel Capital		
	Client Business Address* 540 Madison Avenue	Client Apartment o	or Suite Number
CLIENT ADDRESS AND	Client City* New York	Client State*	Client Zip Code*
NATURE OF BUSINESS	Nature of Client's Business* Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required		
	for compensation totaling \$500,000 If you fail to provide the above Client Co		, provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	1		
CLIENT NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable* Manifold Real Estate		
	Client Business Address* P.O. Box 200463	Client Apartment o	or Suite Number
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code* 78720
NATURE OF BUSINESS	Nature of Client's Business* Real Estate Development		

Section 3b:

Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client	Compensation information	, provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

NO EMPLOYEES TO REPORT	□ I employed or retained no employees during	g the applicable reporting period
PERSON	Title First Name*	Middle
EMPLOYED OR	Last Name *	Suffix
RETAINED	Employer*	Occupation*
BUSINESS ADDRESS	Business Address* City*	Apartment or Suite Number State* Zip Code*
MAYOR/COUNCIL RELATIVE	Is the person identified above related (within the the Council Member, or a member of their household, of their employment *required.	as defined in City Code Section 4-8-6(A)(5)?
OR HOUSEHOLD MEMBER	First Name of Mayor/Council Member	ast Name of Mayor/Council Member

* Indicates a required field



If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.



Section 5: Statement of No Activity

STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED

Lobbyists who have **no reportable activity** for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the **No Activity Confirmation**, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

No Activity Confirmation ☐ I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 6: Expenditure Totals

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

	(\$) Reimbursement to Others	
	(\$) Food and Beverages	
	(\$) Transportation and Lodging	
	(\$) Gifts (other than Awards and Mementos)	
EXPENDITURE	(\$) Entertainment	
TOTALS	(\$) Awards and Mementos	
(Blank values	(\$) Honorariums	
will be interpreted as \$0)	(\$) Attendance of Council Members at Charitable Events or Fundraisers	
	(\$) Media Communications (broadcast, print, advertising, etc.)	
	(\$) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)	



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 7: Expenditure

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total \$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

PAYEE NAME AND BUSINESS INTEREST	Organization Name or Payee Last Name, This payee is a business or business in	nterest of a City Official			
Damas is an individual	If yes, First Name of City Official	Las	t Name of City (Official	
Payee is an individual	Department of City Official	Job	Title of City Off	ficial	
	Payee Address/ PO Box*		Payee Apartment or Suite Number		
PAYEE					
ADDRESS	Payee City*		Payee State*	Payee Z	ip Code [*]
EXPENDITURE DETAILS	(\$) Expenditure Amount* Expenditure Date* Category* Purpose of the Expenditure*				
Identify each City Official w	ho benefitted from or who may	/ have been influer	nced by the	expenditure	, if applicable
City Official First Name	City Official Last Name	Department		Job Title	
Add Another Expenditure Page		Delete this page 32 Revised: 9/25/2017			



Section 8: Declaration and Electronic Submission

DECLARATION

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

Amanda Swor	1/23/2018
Typed Name	Report Date*

Electronic Submission and Signature

I have completed a **Lobbyist Contact Information Form**, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.